



Dkt. 62429/JPW/AJM/AAB

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: David M. Stern and Shi Du Yan
Serial No.: 09/638,695 Group Art Unit: 1632
Filed : August 14, 2000 Examiner: Thai-An N. Ton
For : TRANSGENIC MICE OVER-EXPRESSING ABAD AND MUTANT APP
IN BRAIN AS MODEL OF ALZHEIMER'S DISEASE AND USES
THEREOF

1185 Avenue of the Americas
New York, New York 10036
November 25, 2003

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

AMENDMENT IN RESPONSE TO SEPTEMBER 25, 2003 OFFICE ACTION

This Amendment is submitted in response to a September 25, 2003 Office Action issued by the United States Patent and Trademark Office in connection with the above-identified application. A response to the September 25, 2003 Office Action is due November 25, 2003. Accordingly, this Amendment is being timely filed.

1632

Docket No. 0575/62429/JPW/AJM/AAB



In re application of: David M. Stern and Shi Du Yan

Serial No.: 09/638,695

Group Art Unit: 1632

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Examiner: Thai-An N. Ton

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

November 25, 2003

S I R:

Transmitted herewith is an amendment to the above identified application.

X Small entity status of this application under 37
C.F.R. \$1.9 and \$1.27 has been established by a
verified statement previously submitted.

A verified statement to establish small entity status
under 37 C.F.R. \$1.9 and \$1.27 is enclosed.

X No additional fee is required.

The filing fee is calculated as follows:

	NUMBER AFTER AMEND- MENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		NUMBER OF EXTRA CLAIMS PRESENTED		RATE		FEE		
							SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY
Total Claims	8	-	20	=	0	X	\$9	\$18	=	0	0
Indepen- dent Claims	3	-	3	=	0	X	\$42	\$84	=	0	0
Multiple Dependent Claim(s) Presented _____ Yes <u>X</u> No For First Time							\$140	\$280	0	0	0
							TOTAL ADDITIONAL FEE \$ 0				

*If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than
20, write "20" in this space.

**If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than
3, write "3" in this space.

***If the difference between the "NUMBER AFTER AMENDMENT" and
the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than
"0", write "0" in the space.

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Amendment Transmittal Letter
Page 2

The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment of the number of claims as originally filed

____ Please charge Deposit Account No. 03-3125 in the amount of \$ _____. Three copies of this sheet are enclosed.

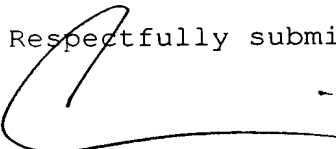
____ A check in the amount of \$ _____ is enclosed.

X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposition Account No. 03-3125. Three copies of this sheet are enclosed.

X Any filing fees under 37 C.F.R. \$1.16 for the presentation of extra claims.

X Any patent application processing fees under 37 C.F.R. \$1.17.

Respectfully submitted,



I hereby certify that this correspondence is being deposited this date with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Alan J. Morrison
Reg. No. 37,399

Date

11/25/03

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